

California Department of General Services

The Ziggurat

Fitness Center Membership Package



Getting Started

Welcome to the Ziggurat Fitness Center (ZFC)! As a DGS employee, you are in an extremely fortuitous position. The Zig is one of the few state facilities that houses a state of the art fitness center for a nominal annual fee. The ZFC is operated in conjunction with the DGS Health and Safety program. If you ever have questions pertaining to the ZFC, please don't hesitate to contact the DGS Safety Officer at 375-4518.

The fitness center is open Monday through Friday, 5 AM to 8 PM and will be closed Saturday, Sunday, and State holidays.

There are NO REFUNDS once access has been paid for. Fees are not dependent on how often or how long the employee will use the Fitness Center.

To start exercising at the ZFC:

- 1. Read and sign this packet.**
- 2. Sign and date the Rules and Regulation Acknowledgement and Statement of Release of Liability (last page)**
- 3. Submit the signed forms, check and/or money order to the Office of Risk and Insurance Management (ORIM), Room#1-460. Contact Debbie DeAnda at (916) 375-4518.**
- 4. An Access card will be assigned to you, or access will be added to the card you currently hold.**

If you are just beginning an exercise program or have had a long (3 months or more) layoff, please note the following:

- It is **STRONGLY** recommended that you consult with your physician prior to beginning an exercise program.
- Start slowly. Do not attempt activities that require extreme strength and/or endurance.
- Make sure you know how to safely use each piece of exercise equipment you have selected.
- You will be more likely to achieve the results you would like if you set realistic goals and stick to them.

ZIG Fitness Center

CODE OF CONDUCT

Welcome! We are happy you chose to spend part of your day using the Zig Fitness Center to help achieve your personal fitness goals! In order to help make the experience pleasurable for everyone, please observe the following regulations:

1. Please Wear Appropriate Attire

- Athletic shoes only (no sandals, boots, etc.)
- No jeans or street clothes
- Shirts will be worn at all times. No bare midriffs.

2. No Food or Drink Please (Water Bottles OK)

- This will remove the possibility of a spill, which could damage the equipment.

3. Please Wipe Machines Off After Using Them and Return Equipment to its Original Location

- Nobody likes to exercise in somebody else's sweat!
- Re-rack weights and stack steps and mats in the corner of the ZFC by the aerobics room
- Do not drop free weights on floor

4. Please limit use of Cardio Machines to 20 Minutes if Others Are Waiting

- It's a bummer when you have to miss out on your daily workout because someone else is monopolizing the machine!
- Please utilize the signup sheet for treadmill usage

5. Please Use Good Judgment While Exercising

- Don't choose weights that are too heavy
- Don't attempt a Cardio Program that is too rigorous for your capabilities
- When possible, exercise with a partner. **THINK SAFETY!**
- No profanity or abusive behavior

6. No guests allowed – the Fitness Center is for DGS employees only!



THANK YOU AND HAVE A GREAT WORKOUT!

ZFC Policies and General Information

Release of Liability:

A liability release form must be signed prior to use of the ZFC. The form is located at the back of this package.

Lost and Found

A lost and found box for small items is in the gym. To reclaim larger items, please contact the Health and Safety Officer at 916-375-4518.

Equipment Repair

If you discover a broken or malfunctioning piece of equipment, please contact the DGS Health and Safety Officer.

Lockers

Are available on a first come basis with the annual fee.

Assigned day lockers are available for “**day use only**” and all contents must be removed when leaving the fitness center. The DGS reserves the right to remove locks and personal belongings if left in the locker room overnight.

Emergencies

1. Call 9-911 for all *medical emergencies*, and then notify building security.
2. Report *all minor injuries* to the Business Services Section (BSS) and the DGS Health and Safety Officer.
3. If you are injured, contact the BSS and the DGS Health and Safety Officer to complete an accident report form.
4. First aid supplies are available in the first aid kit in the main fitness room and in each locker room.

Suggestions

The ZFC welcomes your suggestions, comments, and complaints. There is a suggestion box located by the drinking fountain. Suggestions regarding new equipment purchases etc. are welcomed. However, it is important to note that the Fitness Center is operating on a very small budget. We will do our best to accommodate as many of your suggestions as possible.

ZFC Suggestion Form

Name_____ Today's Date_____
Division/Office_____ Phone #_____

Comment, Suggestion, or Complaint:

ZFC Rules and Regulations Acknowledgement

Please carefully read and sign the following:

My signature below certifies that I acknowledge and agree to comply with all of the Rules and Regulations as described in the Ziggurat Fitness Center (ZFC) Membership Package.

I further acknowledge that all ZFC Rules and Regulations are designed to facilitate the operation of a clean, well-managed facility. Additionally, I understand that these rules may be changed at any time to meet the needs and/or expectations of the Department of General Services.

I understand that if I am found to have abused the rules and regulations outlined above, my privileges for use of the ZFC may be revoked.

Signature _____ Date _____

Print Name _____

Statement of Release of Liability

My signature below certifies that I understand there are inherent risks of injury associated with participating in exercise and wellness related activities. As a willing participant, I agree to accept sole responsibility for any injuries I may incur as a result of my participation in exercise and/or wellness activities inside the Ziggurat Fitness Center (ZFC), including use of the equipment, and participation in any exercise and/or wellness activity. By signing below, I agree to release The California Department of General Services (DGS), of any injuries I may incur in the process of using the ZFC for exercise and wellness related activities.

Signature _____ Date _____

Print Name _____